### NYC DEPARTMENT OF FINANCE OFFICE OF THE CITY REGISTER

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RECORDING AND ENDORSEMENT COVER PAGE

PAGE 1 OF 4

Document Date: 05-25-2016

Preparation Date: 06-29-2016

Document ID: 2016062102256004 Document Type: DEED Document Page Count: 3

PRESENTER:

BARRISTERS TITLE AGENCY, LLC 2275 COLEMAN STREET, UNIT 1A BTA-3004 **BROOKLYN, NY 11234** 

718-676-5222

MIKE@BARRISTERSNY.COM

RETURN TO:

BARRISTERS TITLE AGENCY, LLC 2275 COLEMAN STREET, UNIT 1A

BTA-3004

BROOKLYN, NY 11234

718-676-5222

MIKE@BARRISTERSNY.COM

Borough

Block Lot

PROPERTY DATA Unit Address

BROOKLYN

1498 54

**Entire Lot** 

769 MACDONOUGH STREET

Property Type: DWELLING ONLY - 4 FAMILY

CROSS REFERENCE DATA

Document ID:

**GRANTOR/SELLER:** 

BROOKLYN, NY 11233

769 MACDONOUGH STREET

LUIS VILLAFANE

2016062102256002

**PARTIES** 

GRANTEE/BUYER:

769 M LLC PO BOX 50264

Filing Fee:

BROOKLYN, NY 11205

| FEES | ANT | TAY | CT S |
|------|-----|-----|------|

| İ         |                    | FEED AN     |
|-----------|--------------------|-------------|
| Mortgag   | e:                 |             |
|           | Amount:            | \$<br>0.00  |
| Taxable l | Mortgage Amount:   | \$<br>0.00  |
| Exemption | n:                 |             |
| TAXES:    | County (Basic):    | \$<br>0.00  |
|           | City (Additional): | \$<br>0.00  |
|           | Spec (Additional): | \$<br>0.00  |
|           | TASF:              | \$<br>0.00  |
|           | MTA:               | \$<br>0.00  |
|           | NYCTA:             | \$<br>0.00  |
|           | Additional MRT:    | \$<br>0.00  |
|           | TOTAL:             | \$<br>0.00  |
| Recordi   |                    | \$<br>52.00 |
| Affiday   | it Fee:            | \$<br>0.00  |
|           |                    |             |

250.00 NYC Real Property Transfer Tax: 5,700.00 NYS Real Estate Transfer Tax: 1,600.00

RECORDED OR FILED IN THE OFFICE

OF THE CITY REGISTER OF THE

CITY OF NEW YORK

Recorded/Filed City Register File No.(CRFN):

06-30-2016 16:29

2016000222782

City Register Official Signature

BARGAIN AND SALE DEED, WITH COVENANT AGAINS'I GRANTOR'S ACTS-INDIVIDUAL OR CORPORATION.

CONSULT YOUR LAWYER BEFORE SIGNING THIS INSTRUMENT--THIS INSTRUMENT SHOULD BE USED BY LAWYERS ONLY.

THIS INDENTURE, made this 25th day of May, 2016 BETWEEN

#### LUIS VILLAFANE

With an address at 769 Macdonough Street, Brooklyn, New York 11233 party of the first part, and

#### 769 M LLC

with an address at PO Box 50264, Brooklyn, New York 11205 party of the second part,

WITNESSETH, that the party of the first part, in consideration of Ten Dollars (\$10.00) and other valuable consideration paid by the party of the second part, does hereby grant and release unto the party of the second part, the heirs or successors and assigns of the party of the second part forever,

ALL that certain plot, piece or parcel of land, with the buildings and improvements thereon crected, situate, lying and being in the County of Bronx, known as 769 MACDONOUGH STREET, BROOKLYN, NEW YORK 11233, Block: 01498 Lot: 0054

#### SEE ATTACHED DESCRIPTION

FOGETHER with all right, title and interest, if any, of the party of the first part of, in and to any streets and roads abutting the above-described premises to the center lines thereof; TOGETHER with the appurtenances and all the estate and rights of the party of the first part in and to said premises; TO HAVE AND TO HOLD the premises herein granted unto the party of the second part, the heirs or successors and assigns of the party of the second part forever.

AND the party of the first part covenants that the party of the first part has not done or suffered anything whereby the said premises have been encumbered in any way whatever, except as aforesaid.

AND the party of the first part, in compliance with Section 13 of the Lien Law, covenants that the party of the first part will receive the consideration for this conveyance and will hold the right to receive such consideration as a trust fund to be applied first for the purpose of paying the cost of the improvement and will apply the same first to the payment of the cost of the improvement before using any part of the total of the same for any other purpose. The word "party" shall be construed as if it read "parties" whenever the sense of this indenture so requires.

Power of Attorney being Simultaneously recorded herewith ...

## BARRISTERS TITLE AGENCY, LLC

as Agent for Old Republic National Title Insurance Company

SCHEDULE A (Description)

Title Number: BTA-3139

All that certain plot, piece or parcel of land, situate, lying and being in the Second Ward, Borough of Queens, County of Queens, City and State of New York, bounded and described as follows:

BEGINNING at a point on the westerly side of Stafford Avenue, now known as 69th Avenue, distant 127 feet southerly from the corner formed by the intersection of the westerly side of 69th Avenue and the southerly side of Juno Street;

RUNNING THENCE westerly at right angles to the westerly side of 69th Avenue and part of the distance through a party wall, 100 feet;

THENCE southerly parallel with the westerly side of 69th Avenue, 18 feet;

THENCE easterly again at right angles to the westerly side of 69th Avenue and part of the distance through a party wall, 100 feet to the westerly side of 69th Avenue; and

THENCE northerly along the westerly side of 69th Avenue, 18 feet to the point or place of BEGINNING.

Being the same premises as conveyed in Liber/Reel: 994 Page: 276.

FOR INFORMATION ONLY:

Said Premises being known as 93-07 69th Avenue Queens NY and Section: 17 Block: 3197 Lot: 139

Schedule A Page 1 of 1

IN WITNESS WHEREOF, the party of the first part has duly executed this deed the day and year first above written.

In presence of:

STATE OF (NEW YORK)

COUNTY OF (

On the day of way in the year 2016 before me, undersigned, personally appeared LUIS VILLAFANE, personally known to me or proved to me on the basis of satisfactory evidence be the individual(s) whose name(s) is (are) subscribed to the within instrument and Angele Villagene acknowledged to me that he/she/they executed the same in his/her/their capacity(ies) and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

KELLY OBRIEN
Notary Public, State of New Yo
Reg. No. 010B6211041
Qualified in Kings County
Commission Expires 09/08/20

NOTARY SEAL:

SECTION:

BLOCK:

01498

LOT:

0054

CITY OR TOWN: NEW YORK

COUNTY:

KINGS

RETURN BY MAIL TO:

BARGAIN AND SALE DEED With Covenant Against Grantor's Acts

Title No.

RESERVE THIS SPACE FOR USE OF RECORDING OFFICE

NYC DEPARTMENT OF FINANCE OFFICE OF THE CITY REGISTER



SUPPORTING DOCUMENT COVER PAGE

PAGE 1 OF 1

Document ID: 2016062102256004 Document Type: DEED

Document Date: 05-25-2016

Preparation Date: 06-29-2016

ASSOCIATED TAX FORM ID: 2016062200263

# SUPPORTING DOCUMENTS SUBMITTED:

DEP CUSTOMER REGISTRATION FORM FOR WATER AND SEWER BILLING RP - 5217 REAL PROPERTY TRANSFER REPORT SMOKE DETECTOR AFFIDAVIT

Page Count
1
2

1

https://a836-acris.nyc.gov/DS/DocumentSearch/DocumentImageView?doc\_id=2016062102256004



The City of New York Department of Environmental Protection **Bureau of Customer Services** 59-17 Junction Boulevard Flushing, NY 11373-5108

# **Customer Registration Form for Water and Sewer Billing**

| P                                                                                               | Sewer Billing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|-------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                                 | roperty and Owner Information:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| (1)                                                                                             | Property receiving service: BOROUGH: BROOKLYN BLOCK: 1408                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| (2)                                                                                             | LOI: 54                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| (2)                                                                                             | Property Address: 769 MACDONOUGH STREET, BROOKLYN, NY 11233                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| (3)                                                                                             | Owner's Name: 769 M LLC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|                                                                                                 | Additional Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Affirmation                                                                                     | r:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| <b>V</b>                                                                                        | Your water & sewer bills will be sent to the property address shown above.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| ustomer i                                                                                       | Billing Information:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| Please N                                                                                        | ote:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| charge<br>to pay<br>being p                                                                     | and sewer charges are the legal responsibility of the owner of a property receiving water and/or service. The owner's responsibility to pay such charges is not affected by any lease, license or rangement, or any assignment of responsibility for payment of such charges. Water and sewer sometitute a lien on the property until paid. In addition to legal action against the owner, a failure such charges when due may result in foreclosure of the lien by the City of New York, the property laced in a lien sale by the City or Service Termination. |
| B. Origina                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| Way rei                                                                                         | bills for water and/or sewer service will be mailed to the owner, at the property address or to mate mailing address. DEP will provide a duplicate copy of bills to one other party (such as a large agent), however, any failure or delay by DEP in providing duplicate copies of bills shall in no leve the owner from his/her liability to pay all outstanding water and sewer charges. Contact DEP 595-7000 during business hours or visit www.nyc.gov/dep to provide us with the other party's lion.                                                       |
| Way rei                                                                                         | ieve the owner from his/her liability to pay all outstanding water and sewer charges. Contact DEP 595-7000 during business hours or visit www.nyc.gov/dep to provide us with the other party's ion.                                                                                                                                                                                                                                                                                                                                                             |
| way rel<br>at (718)<br>informat<br>wner's App<br>The undersig<br>has read and                   | roval:  ned certifies that he/she/it is the owner of the property receiving certifie and service of the owner of the property receiving certifies and selections.                                                                                                                                                                                                                                                                                                                                                                                               |
| way rel<br>at (718)<br>informat<br>vner's App<br>The undersig<br>has read and<br>information si | roval:  ned certifies that he/she/it is the owner of the property receiving service referenced above; that he/she/it upplied by the undersigned on this form is true and complete to the best of his/her/its knowledge.                                                                                                                                                                                                                                                                                                                                         |
| way rel at (718) informat wner's App The undersig has read and information si Print Name o      | roval:  ned certifies that he/she/it is the owner of the property receiving service referenced above; that he/she/it upplied by the undersigned on this form is true and complete to the best of his/her/its knowledge.                                                                                                                                                                                                                                                                                                                                         |

2



The City of New York
Department of Environmental Protection
Burcau of Customer Services
59-17 Junction Boulevard
Flushing, NY 11373-5108

# Customer Registration Form for Water and Sewer Billing

| Prop | erty | and | <b>Owner</b> | Inform | ation: |
|------|------|-----|--------------|--------|--------|
|------|------|-----|--------------|--------|--------|

- (1) Property receiving service: BOROUGH: BROOKLYN
- BLOCK: 1498

LOT: 54

- (2) Property Address: 769 MACDONOUGH ST, BROOKLYN, NY 11233
- (3) Owner's Name:

769 M LLC

**Additional Name:** 

#### Affirmation:



Your water & sewer bills will be sent to the property address shown above.

## **Customer Billing Information:**

#### **Please Note:**

- A. Water and sewer charges are the legal responsibility of the owner of a property receiving water and/or sewer service. The owner's responsibility to pay such charges is not affected by any lease, license or other arrangement, or any assignment of responsibility for payment of such charges. Water and sewer charges constitute a lien on the property until paid. In addition to legal action against the owner, a failure to pay such charges when due may result in foreclosure of the lien by the City of New York, the property being placed in a lien sale by the City or Service Termination.
- B. Original bills for water and/or sewer service will be mailed to the owner, at the property address or to an alternate mailing address. DEP will provide a duplicate copy of bills to one other party (such as a managing agent), however, any failure or delay by DEP in providing duplicate copies of bills shall in no way relieve the owner from his/her liability to pay all outstanding water and sewer charges. Contact DEP at (718) 595-7000 during business hours or visit www.nyc.gov/dep to provide us with the other party's

### Owner's Approval:

The undersigned certifies that he/she/it is the owner of the property receiving service referenced above; that he/she/it has read and understands Paragraphs A & B under the section captioned "Customer Billing Information"; and that the information supplied by the undersigned on this form is true and complete to the best of his/her/its knowledge.

Print Name of Owner

Signature:

\_\_Date (mm/dd/yyyy)

Name and Title of Person Signing for Owner, if applicable:

By: Scott Kushnick, sole member

BCS-7CRF-ACRIS REV. 8/08

769 M LLC

2

E

F

2015

16. Total Assessed Value (of all parcels in transfer)

LUIS

Apartment

В

C

D

E

F

G

H

JV

None

1

FIRST WANT

G

7. New Construction on Vacant Land

Entertainment / Amusement

Check one or more of these conditions as applicable to transfer;

Sale Between Related Companies or Partners in Business

Buyer or Seller is Government Agency or Lending Institution

Deed Type not Warranty or Bargain and Sale (Specify Below)

Significant Change in Properly Between Taxable Status and Sale Dates

Sale of Fractional or Less than Fee Interest ( Specify Below )

Other Unusual Factors Affecting Sale Price ( Specify Below )

Community Service

Sale Between Relatives or Former Relatives

Sale of Business is Included in Sale Price

One of the Buyers is also a Selfer

Industrial

Public Service

9. Check the box below which most accurately describes the use of the property at the time of sale:

Residential Vacant Land

Non-Residential Vacant Land

C

D

(Full Sale Price is the total amount paid for the property including personal property. This payment may be in the form of cash, other property or goods, or the assumption of

ASSESSMENT INFORMATION - Data should reflect the latest Final Assessment Roll and Tax Bill

17. Borough, Block and Lot / Roll identifier(s) ( If more than three, attach sheet with additional identifier(s) )

mortgages or other obligations.) Please round to the neerest whole dollar amount.

Siza

8. Seller

Name

В

SALE INFORMATION

18. Sale Contract Date

11. Date of Sale / Transfer

13. Indicate the value of personal property included in the sale

C 3

**BROOKLYN 1498 54** 

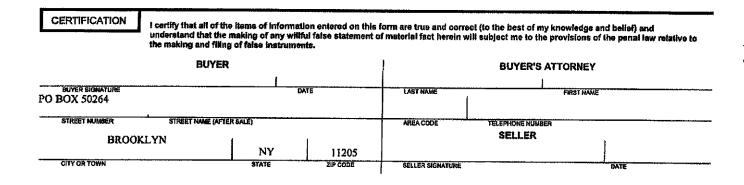
12. Full Sale Price \$

15. Building Class

VILLAFANE

One Family Residential

2 or 3 Family Residential



# Case 1:19-cr-00408-MKB Document 258-14 Filed 09/20/22 Page 11 of 14 PageID #: 1914

| FOR CITY USE ONLY C1. County Code C2. Date Deed/ Recorded                                                                                                                                                                                                        | REAL PROPERTY TRANSFER REPORTATION STATE OF NEW YORK STATE BOARD OF REAL PROPERTY SERVICES RP - 5217NYC                                           |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                                                                                                                                                                                                                  |                                                                                                                                                   |
| 1. Property 769 MACDONOUGH ST Location STREET NUMBER STREET NAME                                                                                                                                                                                                 | BROOKLYN 111233                                                                                                                                   |
| 2. Buyer 769 M LLC Name LAST NAME / COMPANY                                                                                                                                                                                                                      | BOROUGH ZIP CODE                                                                                                                                  |
| LABT NAME / COMPANY                                                                                                                                                                                                                                              | FIRST MAME                                                                                                                                        |
| 3. Tax Indicate where future Tax Bills are to be sent Billing if other than buyer address (at bottom of form) Address LAST NAME / COMP                                                                                                                           | FIRST NAME                                                                                                                                        |
| CTOMP 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4                                                                                                                                                                                                                      | FIRST NAME                                                                                                                                        |
| 4. Indicate the number of Assessment Roll parcels transferred on the dead # of Parcels OP                                                                                                                                                                        | OITY OR TOWN STATE ZIP CODE                                                                                                                       |
| 5. Desd                                                                                                                                                                                                                                                          | Part of a Parcel  4A. Planning Board Approval - N/A for NYC  4B. Agricultural District Notice - N/A for NYC  Check the boxes below as they apply: |
| Size FRONT FEET DEPTH OR                                                                                                                                                                                                                                         | 6. Ownership Type is Condominium 7. New Construction on Vacant Lend                                                                               |
| 8. Seller LABT NAME / COMPANY                                                                                                                                                                                                                                    | LUIS                                                                                                                                              |
| 1                                                                                                                                                                                                                                                                | FIRST NAME                                                                                                                                        |
| LAST NAME / COMPANY                                                                                                                                                                                                                                              |                                                                                                                                                   |
| 9. Check the box below which most accurately describes the use of the prop                                                                                                                                                                                       | FIRST NAME                                                                                                                                        |
| B 2 or 3 Family Residential D Non-Residential Vacant Land                                                                                                                                                                                                        | E Commercial G Entertainment / Amusement I Industrial F Apartment H Community Service J Public Service                                            |
| 0. Sele Contract Det                                                                                                                                                                                                                                             | 14. Check one or more of these conditions as applicable to transfer:                                                                              |
| Month Day Year                                                                                                                                                                                                                                                   | A Sale Between Relatives or Former Relatives                                                                                                      |
| 5 Date of Oct. (m                                                                                                                                                                                                                                                | B Sele Between Related Companies or Partners in Rusiness                                                                                          |
| t. Date of Sale / Transfer 5 / 25 / 2016  Month Dey Year                                                                                                                                                                                                         | D Buyer or Selfer is Government Agency or Lending Institution                                                                                     |
| 2. Full Sale Price \$                                                                                                                                                                                                                                            | E Deed Type not Warranty or Bargain and Sale (Specify Below )  F Sale of Fractional or Less than Fee Interest (Specify Below)                     |
| (Full Sale Price is the total amount paid for the property including paraonal propert<br>This payment may be in the form of cash, other property or goods, or the assumption<br>mortgages or other obligations.) Please round to the nearest whole dollar amount | ty. H Sale of Business is included in Sale Price                                                                                                  |
| Indicate the value of personal operty included in the sale                                                                                                                                                                                                       | None   Sale Price (Specify Below)                                                                                                                 |
| ECCHENT INFORMATION                                                                                                                                                                                                                                              |                                                                                                                                                   |
| ESSIMENT INFORMATION - Data should reflect the latest Singl Assault                                                                                                                                                                                              | MANI AND AND THE DIES                                                                                                                             |
| ESSMENT INFORMATION - Data should reflect the latest Final Assess  Building Class C 3 18. Total Assessed Value (of all pa                                                                                                                                        | arcels in transfer)                                                                                                                               |
| Building Class C, 3 16. Total Assessed Value (of all pa                                                                                                                                                                                                          | arcels in transfer)                                                                                                                               |
|                                                                                                                                                                                                                                                                  | arcels in transfer)                                                                                                                               |

| 7454  |                                 |
|-------|---------------------------------|
| DATE  | LAST NAME: FIRST NAME:          |
|       | /ARBACOIN! TELEPHONE NUMBER 4   |
| 11205 | rus Villalom & Survey Wohn 5/25 |
|       |                                 |
|       | 11205<br>Sale                   |

Affidavit of Compliance with Smoke Detector Requirement for One and-Two Family Dwellings

### AFFIDAVIT OF COMPLIANCE WITH SMOKE DETECTOR REQUIREMENT FOR ONE- AND TWO-FAMILY DWELLINGS

| State of New York )                                                                                                                                                                      |                                                                                                             |                                                                 |                                                                |                                              |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|----------------------------------------------------------------|----------------------------------------------|
| County of ) SS.:                                                                                                                                                                         |                                                                                                             |                                                                 |                                                                |                                              |
| The undersigned, being duly sworn, the real property or of the cooperativ                                                                                                                | depose and say under pe                                                                                     | nalty of perjury that                                           | t they are the                                                 | grantor and grantee of                       |
|                                                                                                                                                                                          | ACDONOUGH STRE                                                                                              |                                                                 | e rear brober                                                  | y located at                                 |
| St                                                                                                                                                                                       | reet Address                                                                                                | anna migraph phaemar phaere of                                  | ******************************                                 | Unit/Apt.                                    |
| BROOKLYN                                                                                                                                                                                 | New York,                                                                                                   | 1498                                                            | 54                                                             |                                              |
| Borough                                                                                                                                                                                  | Sec. 18                                                                                                     | Block                                                           | Lol                                                            | (me Fiennses);                               |
| compliance with the provisions of Ar<br>the City of New York concerning sm                                                                                                               | ticle 6 of Subchapter 17                                                                                    | pproved and opera<br>of Chapter 1 of Tit                        | tional smoke<br>le 27 of the A                                 | detecting device in<br>dministrative Code of |
| compliance with the provisions of A                                                                                                                                                      | rticle 6 of Subchapter 17 oke detecting devices; ce with New York City A                                    | of Chapter 1 of Tit                                             | le 27 of the A<br>e Section 11-2                               | dministrative Code of                        |
| compliance with the provisions of Ai<br>the City of New York concerning sm<br>That they make affidavit in complian                                                                       | rticle 6 of Subchapter 17<br>oke detecting devices;<br>ace with New York City A<br>one grantee are required | of Chapter 1 of Tit                                             | le 27 of the A<br>e Section 11-2<br>ized).                     | dministrative Code of<br>2105 (g). (The      |
| compliance with the provisions of Ar<br>the City of New York concerning sm<br>That they make affidavit in complian<br>signatures of at least one grantor and                             | rticle 6 of Subchapter 17 oke detecting devices; ce with New York City A one grantee are required           | of Chapter 1 of Tit Administrative Cod , and must be notal Name | le 27 of the A<br>e Section 11-7<br>rized).                    | dministrative Code of<br>2105 (g). (The      |
| compliance with the provisions of Ar<br>the City of New York concerning sm<br>That they make affidavit in complian<br>signatures of at least one grantor and<br>Name of Grantor (Type or | rticle 6 of Subchapter 17 oke detecting devices; ace with New York City A one grantee are required          | of Chapter 1 of Tit Administrative Cod , and must be notal Name | le 27 of the A<br>e Section 11-2<br>ized).<br>of Grantee (Type | dministrative Code of<br>2105 (g). (The      |

These statements are made with the knowledge that a willfully false representation is unlawful and is punishable as a crime of perjury under Article 210 of the Penal Law.

NEW YORK CITY REAL PROPERTY TRANSFER TAX RETURNS FILED ON OR AFTER FEBRUARY 6th, 1990, WITH RESPECT TO THE CONVEYANCE OF A ONE- OR TWO-FAMILY DWELLING, OR A COOPERATIVE APARTMENT OR A CONDOMINIUM UNIT IN A ONE- OR TWO-FAMILY DWELLING, WILL NOT BE ACCEPTED FOR FILING UNLESS ACCOMPANIED BY THIS AFFIDAVIT.

1

| Affidavit of Compliance with Smoke Detector Requirement for One and-Two Femily Dwellings |      |  |
|------------------------------------------------------------------------------------------|------|--|
|                                                                                          | <br> |  |

# AFFIDAVIT OF COMPLIANCE

|                                                   | FOR O                                                                                                | SMOKE DETECT<br>NE- AND TWO-F                     | OR REQUIRI<br>AMILY DWEI                                                                          | EMENT<br>LINGS                          |                                         |              |
|---------------------------------------------------|------------------------------------------------------------------------------------------------------|---------------------------------------------------|---------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------------------|--------------|
| State of New York                                 | )                                                                                                    |                                                   |                                                                                                   |                                         |                                         |              |
| County of                                         | ) SS.:<br>)                                                                                          |                                                   |                                                                                                   |                                         |                                         |              |
| The undersigned, be<br>the real property or       | ing duly sworn, de<br>of the cooperative s                                                           | pose and say under per<br>thares in a cooperative | naity of perjury the<br>corporation ownit                                                         | at they are the                         | grantor and grantce of<br>ty located at |              |
| 1/varceden mane all properties (4) may 148 41     | 769 M                                                                                                | ACDONOUGH ST                                      |                                                                                                   | _                                       |                                         |              |
|                                                   | Street                                                                                               | Address                                           |                                                                                                   | * * *********************************** | * ****                                  |              |
|                                                   | OKLYN                                                                                                | New York,                                         | 1498                                                                                              | 54                                      | Unit/Apt.                               |              |
|                                                   | ough                                                                                                 | dwelling, or a cooper                             | Block                                                                                             | 54                                      | (the "Premises");                       |              |
| signatures of at least                            | ivit in compliance vone grantor and one                                                              | with New York City Ac<br>grantee are required,    | and must be notar                                                                                 | ized).                                  |                                         |              |
| Juis V                                            | Macain                                                                                               | •                                                 | B4: 3                                                                                             |                                         | ushnick , Sol                           | le<br>member |
| Name                                              | of Grantor (Type or Print                                                                            |                                                   | 69 M L                                                                                            | C                                       |                                         |              |
| Mis Villaform                                     | 6 Angel                                                                                              | Willofone                                         |                                                                                                   | Grantee (Type o                         | or Print)                               |              |
| ₽ Si                                              | mature of Grander 6.                                                                                 | Agent:                                            | Sign                                                                                              | nature of Grante                        | <b>29</b>                               |              |
| Sworn to before me this date of                   | May                                                                                                  | 20/4 Swor                                         | n to before me                                                                                    | Mas                                     | : 110                                   |              |
| (1) (Sus                                          | KELLY OBRIEN Poblic, State of New Y g. No. 010B6211041 Illiad in Kings County ssion Expires 09/08/20 | fork                                              | date of KELLY OBRIE Otary Public, State of Reg. No. 010862 Qualified in Kings Omnission Fynics of | N<br>New York<br>11041<br>County        | y 20 1le                                |              |
| These statements are m<br>a crime of perjury unde | age with the knowl                                                                                   | edice that a will fall of                         | lse representation                                                                                | is unlawful a                           | nd is punishable as                     |              |

NEW YORK CITY REAL PROPERTY TRANSFER TAX RETURNS FILED ON OR AFTER FEBRUARY 6th, 1990, WITH RESPECT TO THE CONVEYANCE OF A ONE- OR TWO-FAMILY DWELLING, OR A COOPERATIVE APARTMENT OR A CONDOMINIUM UNIT IN A ONE- OR TWO-FAMILY DWELLING, WILL NOT BE ACCEPTED FOR FILING UNLESS ACCOMPANIED BY THIS AFFIDAVIT.

1